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Bib Data Sheet

CONFIRMATION NO. 4049

SERIAL NUMBER 10/083,324	FILING DATE 02/26/2002 RULE	CLASS 713	GROUP ART UNIT 2131	ATTORNEY DOCKET NO. CTX-079
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** CONTINUING DATA ***** MTH

** FOREIGN APPLICATIONS ***** MTH

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/01/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 6	TOTAL CLAIMS 68	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature	Initials MTH			

ADDRESS

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TITLE

Secure traversal of network components

FILING FEE RECEIVED 1772	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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	<input type="checkbox"/> Other _____
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